PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

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7590 09/11/2006

LAW OFFICES OF ALBERT S MICHALIK PLLC 704-228TH AVENUE NE

01/23/2001

SMALL ENTITY

NO

SUITE 193

09/768,098

APPIN TYPE

nonprovisional

CVANDER

SAMMAMISH, WA 98074

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2630

TOTAL FEE(S) DUE

\$1700

(Denositor's name)

9628

DATE DUE

12/11/2006

(Signature (Dat ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR David P. Golds

PUBLICATION FEE DUE

£200

CLASS SUBCLASS

TITLE OF INVENTION: METHOD AND SYSTEM FOR DETERMINISTIC ORDERING OF SOFTWARE MODULES ISSUE FEE DUE

\$1.400

ABTIBUT

and district.	744.7 614.1	001100 000000000		
BULLOCK, JR, LEWIS ALEXANDER	2195	718-102000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53). Change of correspondence address (or Change of Correspondence Address form (TOOSPI 122) attached. "Fee Address" indication (or "Fee Address" Indication form PTOOSBI47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.		or agents OR, alternative (2) the name of a single registered attorney or a	3 registered patent attorneys vely, e firm (having as a member a agent) and the names of up to meys or agents. If no name is	I Workman Nydegger 2 3
ASSIGNEE NAME AND RESIDENCE DATA PLEASE NOTE: Unless an assignee is ident recordation as set forth in 37 CFR 3.11. Comp	ified helow, no assignee	data will appear on the part of the part o	atent. If an assignee is identificassignment.	ed below, the document has been filed for
(A) NAME OF ASSIGNEE MICROSOFT CORPORATION		Redmond, WA	and STATE OR COUNTRY)	
Please check the appropriate assignee category or	categories (will not be pr	rinted on the patent):	Individual S Corporation or	other private group entity Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.

Issue Fee

Dublication Fee (No small entity discount permitted)

Advance Order - # of Copies ___

5. Change in Entity Status (from status indicated above)

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-3178 (enclose an extra copy of this form).

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the precious of the United States Palent and Fradermark Office.

Authorized Signa RICK D. NYDEGGER Typed or printed name

Date October 27, 2006

Registration No.

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